

# EGrants VOCA Application Instructions

## Getting to the Application

The application is listed on EGrAMS at <https://egram-mi.com/dch>

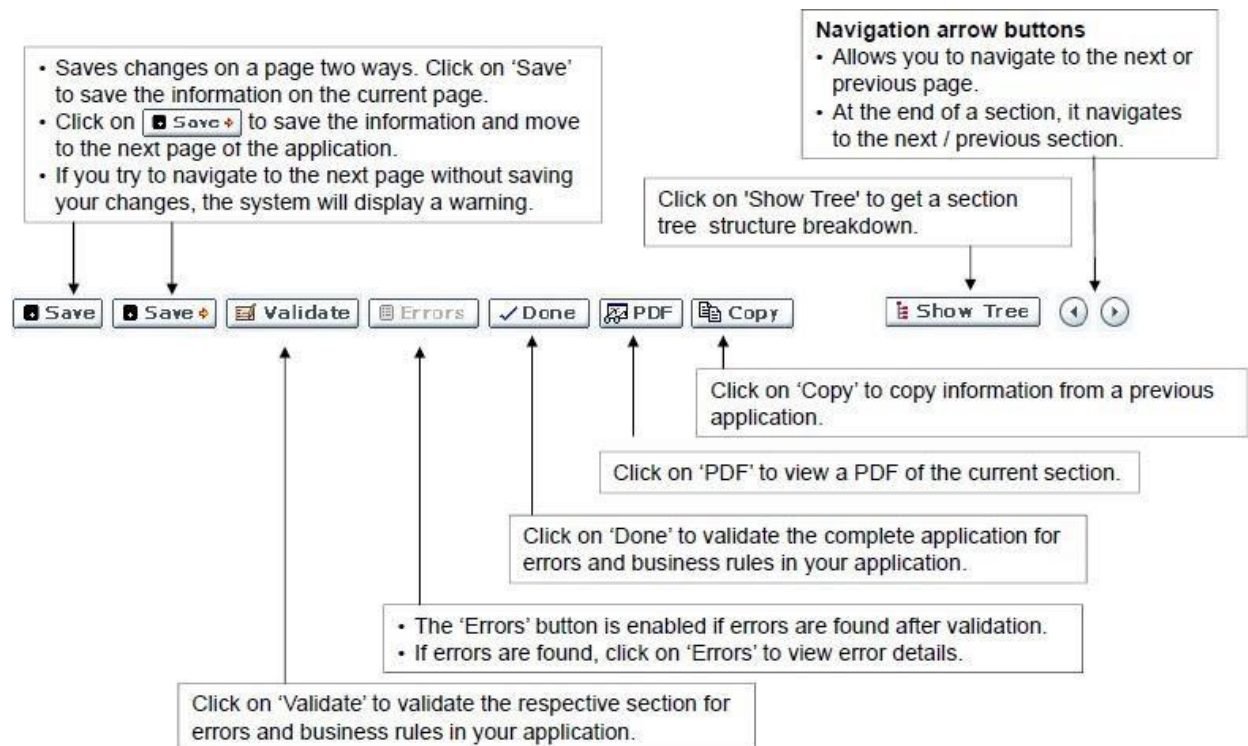
Go to Grantee->Grant Application->Enter Grant Application, click 'Go'. Once at the Grant Application Entry Screen select a Grant Program, it should be VOCA Crime Victim Assistance-20XX (with the year you are applying for). Click the 'Go' button. Your application will be displayed.

A blank version of the application can be found on EGrAMS at <https://egram-mi.com/dch/user/home.aspx?Mode=Logout>

Under Current Grants go to Legal and Policy Affairs->CVS-2016->View EGrAMS Application Form.

## Navigating the Application

There are seven section tabs that you can click to move around the application. You can also click on 'Show Tree' to move around within a section tab. 'Show Tree' will display a menu, click on the page you want to go to and click 'OK'.



## Due Dates

If your agency is delayed in meeting the application due date during an allocation year, your agency will need to request an extension in writing from Leslie O'Reilly prior to the due date. The request should include the circumstances surrounding the delay (such as power outage, etc.).

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## Facesheet

### Demographic Information (Fiscal Agent Information - Page 1)

- Egrams prepopulates the fiscal information from the Portal. Check to make sure that the information is correct. If the information is incorrect, change it here and update the Portal.
- The Reference number is your agency's DUNS number. You can apply for a DUNS number at [www.dnb.com](http://www.dnb.com)
- The agency's fiscal year is not necessarily the project dates.

### Organizational Detail (Fiscal Agent Information - Page 2)

- Nonprofits should include their Michigan Solicitation Registration Number which can be found on your Michigan Solicitation Registration Document.
- All agencies are required to have a CCR registration. This means that you have a DUNS number registered with SAM. Your agency's SAM account will need to be reactivated every year. [www.sam.gov](http://www.sam.gov)
- The State MESC (Michigan Employment Security Commission) number is the account in which unemployment funds are placed. Most agencies have this account, but not all.
- The Sales Tax number is only required of agencies that collect sales tax whether they need it for our program or not.
- Please complete and attach the Financial Capability Questionnaire. Do not include a copy of your Audit here your agency's most recent audit should be uploaded to the Portal. The upload file should be in PDF format with a file name no longer than 13 characters including spaces, and should not include special characters such as \_%/@. This form can be found at <http://ojp.gov/funding/Apply/Resources/FinancialCapability.pdf>

### Program /Service Information (Program Information - Page 1)

- The Program Name, Amount of Funds, and Project Cost are prepopulated. Check to make sure that the information is correct. If the information is not correct do not change it, call your VOCA liaison.
- Please indicate if the grantee agency is implementing the program. If 'No' is selected, enter the implementing agency's name. Click on the mailbox to enter the implementing agency's contact information.
- The project start and end date are typically the state fiscal year of October 1<sup>st</sup> through September 30<sup>th</sup>.

### Service Impact and Victim Population (Program Information - Page 2)

- (e) Select the appropriate radio button to indicate what the grant will be primarily used for.
- (f) Select the appropriate radio button to indicate the purpose of the grant.
- (g) Select the appropriate box(es) to indicate which type(s) of victims will be served by the VOCA project.
- (h) Identify the VOCA FUNDED SERVICES to be provided by project staff. This question is for VOCA funded services only. VOCA does not fund Shelter services. **Assistance in Filing Compensation Claims is a requirement of the grant.**
- (i) Identify other services offered but NOT VOCA FUNDED provided to victims by your agency. This question is for all non VOCA funded services offered at your agency.

### Source of Funding (Program Information - Page 3)

- List source of funds for all victims' service program with your agency, not just the VOCA funded project.

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- Only list funding for victim assistance services.
- Each funding source needs to be listed for the application year and current year if the funding source was used during that time period. If your agency received funding from a source for only one year, list \$0 for the year you didn't receive funding from that source.
- Applicants must demonstrate financial stability and document that 25-50 percent of their financial support is from non-federal sources.
- Federal funds include funds from Department of Justice (VOCA, COPS, Byrne, STOP Grants, Violence Against Women Act Grants), Health and Human Services (Rape Prevention, Family Violence and VOCA Children's Justice Act), Americorps, FEMA, Housing and Urban Development, and McKinney Act grants. Monies from any of these federal programs may not be used as source of match for VOCA grants. This is not discretionary. It is a required condition of federal funding to the State of Michigan.
- State funds include any type of funding received from state government sources.
- Local funds include any type of funding received from local governmental sources (county, municipal, and township).
- Other funds include any type of funding received from United Way, foundation grants, donations, fundraising, etc.

## Prorate VOCA Project Funds (Program Information - Page 4)

- Enter the dollar amount for each of the VOCA project funds that are to be allocated to the different types of victimizations.
- The types of victims should be consistent with the types of victims listed on the Service Impact and Victim Population question (g) on the Service Impact and Victim Population page.
- The total should be the Federal agreement amount.
- Enter \$0 for all of the types of victimization that will not be funded by VOCA.
- There is a worksheet to help you fill this out under show documents in the top right corner of the screen called VOCA Prorated Project Funding Worksheet.

## Certifications/Contacts Information

- Identify an Authorized Official, Civil Rights Person, Financial Officer, and Project Director.
- The Civil Rights person is the only role that can be the same as another role.
- Your agency **cannot** have more than one person listed for any of these role.
- The Egrams Login needs to be filled in using the 'Lookup' button. If the person is not listed in the 'Lookup' menu they will need to set up an Egrams User Profile and have the Project Director assign them to the grant.
- Do not use the same email address for multiple users. Each user needs to have a unique email address.

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## Certifications

### Special Certifications

- Read and confirm the statements shown.

### Equal Employment Opportunity Plan (EEOP)

- Either the EEOP Plan or EEOP Certification Form needs to be uploaded into the EGrams Portal.  
<https://egramsmi.com/portal>

### Limited English Proficiency (LEP)

- Upload the Self-Assessment Review and Four Factor Assessment to the Egrams Portal.
- If your agency has a written policy/plan on providing language access services to LEP person than it needs to be uploaded to the EGrams Portal as well.

## Narrative

### Abstract

- Provide an overview of your agency's proposed VOCA project for victims of crime.
- This section should specifically address how your agency's proposed VOCA project will help you to reach the Objectives identified in your Work Plan.
- Please limit your response to 5000 characters.

### Counties

- Indicate the County(ies) in which the VOCA project will operate and that you propose to provide services.

### U.S. Congressional, State Senate and State House Districts

- Indicate the U.S. Congressional, State Senate and House District(s) in which the project will operate and that you propose to provide services by clicking on the appropriate box(es).
- Download a map of Michigan Congressional Districts at:  
[http://michigan.gov/documents/Congress01-state-E\\_43697\\_7.pdf](http://michigan.gov/documents/Congress01-state-E_43697_7.pdf)
- Download a map of Michigan State Senate Districts at:  
[http://michigan.gov/documents/CGI\\_Senate01-state-E\\_117281\\_7.pdf](http://michigan.gov/documents/CGI_Senate01-state-E_117281_7.pdf)
- Download a map of Michigan State House Districts at:  
[http://www.michigan.gov/documents/House\\_state\\_16750\\_7.pdf](http://www.michigan.gov/documents/House_state_16750_7.pdf)

### Mission Statement

Please provide your agency's mission statement regarding provision of service to crime victims. Please limit your responses to 5000 characters.

### Victims Served

- For the most recently ended and identified calendar or fiscal year, please provide the total number and types of victims served by your agency. Please limit your responses to 5000 characters.
- Example:  
For the fiscal year 2014 the agency provided services to 200 sexual assault victims and 300 child sexual assault victims.

### Agency History

- Explain why it was formed, when it was formed (date created), how it was formed (grass roots or legislative mandate), and how it has changed since formation.

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- Provide the number of agency work sites in service area, and the agency's governing and organizational staffing structure.
- For public agencies, indicate when the public official was elected or appointed.
- For non-profit organizations, indicate how and when the executive director was appointed (e.g., by the board of directors, after a search, by a personnel committee recommendation, etc.).
- Provide the name and title of the person responsible for hiring and supervision of agency staff.
- Provide the name and title of the person responsible for direct supervision of VOCA project staff.
- Please limit your responses to 5000 characters.

## Interagency Coordination

- List four agencies with which you have a significant program service relationship to accomplish coordinated services for crime victims as outlined in the Service Information
- Identify those activities and services provided by your agency on-site, in conjunction with, or at the request of the organization listed.
- Identify those agencies with which you have formal agreements regarding the provision or improvement of services to crime victims. Documented interagency agreements are preferred.
- Examples:  
Organization: Police Department, City in Michigan  
Formal Agreement: Yes  
Activities: Responding to all police calls where there is a victim of domestic violence, sexual assault, or child abuse.  
Services: Crisis intervention, hospital accompaniment and criminal justice support and advocacy during investigation and criminal trial and post-sentencing.  
Organization: County Medical Center  
Formal Agreement: Yes  
Activities: Responding to all requests by County Medical Center Emergency Room staff where there is a victim of sexual assault or child sexual assault.  
Services: Personal advocacy and crisis counseling provided to victims during forensic medical examination.

## Community Collaboration

- List four examples of your agency's leadership or participation in victims' organizations, task forces and coordinating groups that promote interagency training, coordination, and quality victim services.

## Crime Victims Compensation

- To ensure compliance with VOCA grant requirements to assist victims with Crime Victims Compensation, describe what your agency's practices are or will be in identifying and assisting injured victims of crime in applying for Crime Victims Compensation. Assisting victims in Filing Compensation Claims is a requirement of the grant.
- Identify if this assistance is provided by one or more staff, whether information about Crime Victims Compensation is included in public presentations or written materials

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about services provided at your agency and if assistance with compensation is included in client intake process.

- Please limit your responses to 5000 characters.

## Maintaining Qualified Staff

- Briefly describe what your agency's practices are in maintaining trained and qualified staff at your agency.
- What types of training or continuing education requirements do you have for direct service staff at your agency?
- Are continuing education credits or credentials required for any of your staff members? For example, are staff required to be credentialed by NOVA's National Advocate Credentialing Program (Credentialed Advocate - Provisional, Basic, Intermediate, Advanced) or have Social Work CEUs?
- How are these requirements being funded? For example, agency paid using agency funds or grant funds or staff paid out-of-pocket?
- Has it been difficult for your agency?
- Provide assurance that the agency will provide, with grant or match funds (or local funds at no cost to the grant), at least 24 hours of skills building staff training during the grant project for each grant funded and match staff position.
- Please limit your response to 5000 characters.

## Volunteers

- Describe what your agency's practices are or will be in maintaining a community volunteer commitment including recruitment, training, supervision and recognition activities.
- Describe your agency's volunteer effort by indicating: how many volunteers; how many total volunteer hours; how often volunteers are recruited and who recruits; what type of screening and interviews; what type of training (i.e., quarterly trainings or monthly in-service); what type of commitment is required of volunteers (number of months or hours); how volunteers are supervised and who supervises them; and what volunteer recognition activities occur and how often.
- Please limit your responses to 5000 characters.

## Public Awareness

- Describe how your agency provides or will provide information to the public and other service providers about the crime victim services activities of your agency and this project.
- At a minimum, information about the VOCA grant project should be included in public presentations, brochures and annual reports, and acknowledge the CVSC and VOCA Crime Victims Fund.
- Please limit your responses to 5000 characters.

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## Problems

- Describe the problem(s) in your community which your project(s) addresses/will address. Provide local statistical and/or other data supporting the need for services.
- Recent local data with dates and sources cited is strongly preferred.
- Example:  
According to statistical data from Smith and Jones Counties Children's Services, from 2010 through 2015, nearly 10,000 reports of child abuse/neglect were made in our target service area, which extends over a two-county area. ("Smith and Jones Counties Children's Services Annual Reports, 2009-2015"; 2,094 in 2011, 2,111 in 2012, 2,652 in 2013, 1,876 in 2014, and 1,699 in 2015.) These reports resulted in nearly 6,000 findings of abuse or neglect, over 1,000 foster placements, and over 700 convictions for criminal sexual assault. ("Children's Services".) According to the U.S. Census Bureau, the poverty rate in Smith County is 18.1%, while the poverty rate in Jones County is 14.2%. ("U.S. Census Bureau, County Quick Facts).

## Victim Needs

- State the needs of the victims affected by the problem(s) you listed in the previous question.
- Example:  
Sexually abused children have a number of serious needs that must be met for their recovery and their ability to grow into healthy, functional adults. In the immediate aftermath of disclosure of abuse, a child and the non-offending parent(s) need crisis intervention, counseling and support services. They also need criminal justice support and advocacy and counseling as cases proceed to criminal court. In the longer-term, abused children frequently need to develop coping skills to help them recover emotionally. Many also require non-offending parents to acquire improved child-rearing and skills to further protect children from abuse.
- Please limit your responses to 5000 characters.

## Other Local Services

- Excluding the services your agency provides, list and describe other efforts in your community that address or have addressed the problem(s) and/or needs indicated in the Problems and Client Needs screen.
- Example:  
Agency/Organization: City of Mayflower Housing Corporation  
Services: Housing Corporation staff make priority placements for housing for victims of domestic violence from Victim Service Agency. Housing Corporation staff provide victims with advocacy and support in locating and securing housing.

## Staff Description

- Describe the requested staff positions, including:
  - 1) A general overview of staff role and responsibility.
  - 2) Are staff full or part time?
  - 3) Are you asking for continued funding or is new VOCA support is requested for each position?

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4) Rank in order the three most critical project activities to be performed. These project activities should correlate to the project activities presented in the Workplan section of this application.

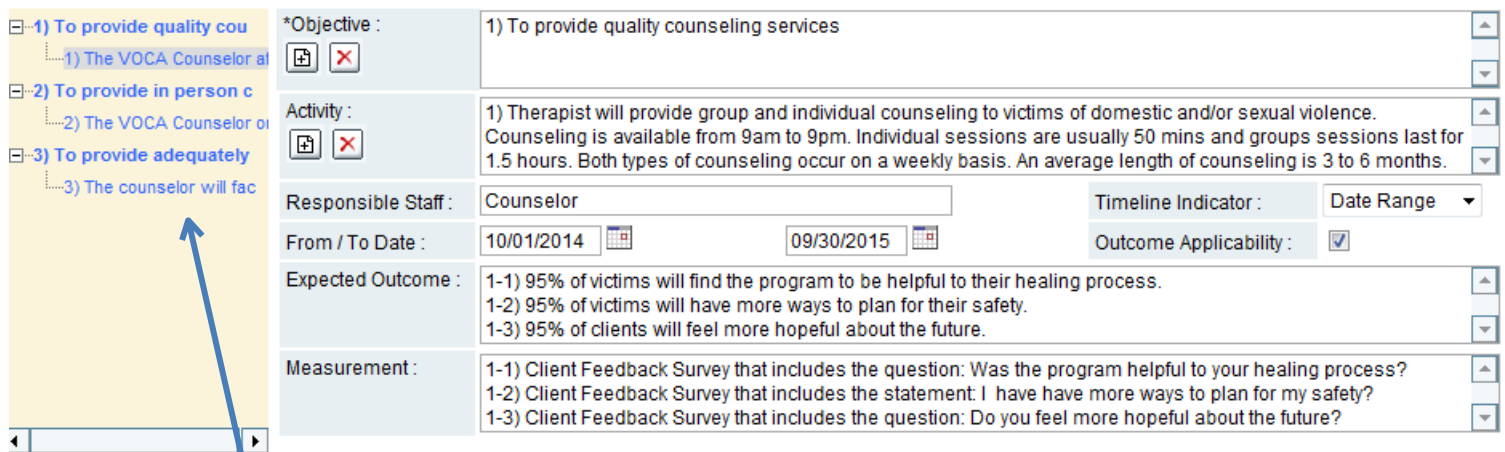
- **Example:**

Victim Service Agency proposes to continue funding two full-time Crime Victim Advocates. We also propose that VOCA funds support the hiring of one full-time M.S.W. Counselor. These staff would provide services to homicide survivors. Victim advocates would perform the following: **ACTIVITY #1:** Coordinate volunteer crisis intervention and court advocate teams to respond to the immediate needs of homicide survivors at hospitals, police departments, prosecutors' offices and during trial; and **ACTIVITY #2:** Advocacy support services responding to both personal and legal advocacy needs of survivors. The M.S.W. Counselor would perform the following: **ACTIVITY #3:** Counseling, crisis intervention and support groups.

### Staff and Volunteers

- If your agency is requesting a volunteer waiver it should be uploaded on this page.

### Work plan



The screenshot shows the EGrams VOCA application interface. On the left is a tree view with three main objectives:
 

- 1) To provide quality counseling services
- 2) To provide in person counseling services
- 3) To provide adequately funded counseling services

 Each objective has sub-items. A blue arrow points from the tree view to the right-hand form, which is a detailed view of the first objective.

*Objective :	1) To provide quality counseling services		
Activity :	1) Therapist will provide group and individual counseling to victims of domestic and/or sexual violence. Counseling is available from 9am to 9pm. Individual sessions are usually 50 mins and groups sessions last for 1.5 hours. Both types of counseling occur on a weekly basis. An average length of counseling is 3 to 6 months.		
Responsible Staff :	Counselor	Timeline Indicator :	Date Range
From / To Date :	10/01/2014	09/30/2015	Outcome Applicability : <input checked="" type="checkbox"/>
Expected Outcome :	1-1) 95% of victims will find the program to be helpful to their healing process. 1-2) 95% of victims will have more ways to plan for their safety. 1-3) 95% of clients will feel more hopeful about the future.		
Measurement :	1-1) Client Feedback Survey that includes the question: Was the program helpful to your healing process? 1-2) Client Feedback Survey that includes the statement: I have have more ways to plan for my safety? 1-3) Client Feedback Survey that includes the question: Do you feel more hopeful about the future?		

- You can navigate to the 3 objectives using this tree.
- Please provide only the three most critical project activities and rank in order of importance. These project activities should correlate to the project activities presented in the Project Resources screen of the Narratives section.
- These project activities, expected outcomes, outcome measures and long-term objectives should reflect your thoughts regarding the evaluation of your project. Example Activities, how to Measure Outcomes, and Long-Term Objectives have been provided on the CVSC website ([http://michigan.gov/mdch/0,4612,7-132-54783\\_54853\\_69769---,00.html](http://michigan.gov/mdch/0,4612,7-132-54783_54853_69769---,00.html)) titled: Examples Project Activities and Outcomes. Expected Outcome section requires that you describe what change you expect to occur as a result of the project activity. Outcomes must be measurable and tied to the project activity. Outcomes are changes in knowledge, attitudes, skills, behaviors, expectations, emotional status, or life circumstances that the project activity is designed to bring about in crime victims and their families. A list of acceptable outcomes approved by CVSC for VOCA Grantees by activity is provided on the CVSC website



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([http://michigan.gov/mdch/0,4612,7-132-54783\\_54853\\_69769---,00.html](http://michigan.gov/mdch/0,4612,7-132-54783_54853_69769---,00.html)) titled:  
Examples Project Activities and Outcomes.

- Please label the items in your workplan as follows: Objective 1), Activity 1), Expected Outcome 1-1), 1-2), 1-3), Measurement 1-1), 1-2), 1-3), then for the second objective, Objective 2) Activity 2) Expected Outcome 2-1), 2-2), 2-3) etc. See screen shot above.
- Objective: Enter an Objective in the text box provided.
- Activity: Enter an activity associated to that Objective in the text box provided.
- Responsible Staff: Enter the position title for staff responsible for this activity. Do not enter staff names.
- Timeline Indicator: Select Date Range or Date using the 'dropdown'. Then enter the actual date information:
- Date Range: Enter the timeframe associated with completing the activity in the From/To Date fields, using the 'Calendar Lookup'.
- Date: Enter the expected completion Date in the From field, using the 'Calendar Lookup.'
- Outcome Applicability: Reporting of outcomes is required, please check the outcome applicability box and proceed to Expected Outcomes and Measurement fields.
- Expected Outcomes: Enter 3 expected outcomes for this activity.
- Measurements: Enter the measurement that will be used to indicate that the outcome has been achieved.

## Budget

### General Budget Instructions

- Amount = Federal Agreement Amount
- Cash= Cash Match
- In Kind= Volunteer Match
- Identify Source of Match in the note section of the line used as Match.
- VOCA funds may be used to purchase furniture and equipment that provides or enhances direct services to crime victims. VOCA funds cannot support the entire cost of an item that is not used exclusively for victim-related activities, but can support a prorated share of such an item.

### Salary & Wages

- Please select the position title from the look up menu that best matches the position title at your agency. If your agency's position title is not an exact match for the title selected, please list your actual position title in the Notes area.
- The Employee name goes into the box below the Position Title.
- Upload the position description and resume as one file for each position at the end of their line. The upload file should be in PDF format with a file name no longer than 13 characters including spaces, and should not include special characters such as \_%/@.
- The Position Description must include:
  - The title of the position.
  - The duties and responsibilities of the position.
  - The minimum qualifications.

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- The supervisory relationship including who supervises the position and if the position supervises others.
- The skills and knowledge required for the position.
- The personal qualities required for the position.
- The amount of travel and or other special conditions or requirements.
- The hours per day or week the employee will be expected to work.
- The exempt or non-exempt status for the position.
- The salary range for the position.
- The resume must be updated to include the current position.
- Upload the organizational chart and Board of Directors list (nonprofit organizations only) as one file in the Attachment space provided above the instruction box. The upload file should be in PDF format with a file name no longer than 13 characters including spaces, and should not include special characters such as \_%/@.
- The chart must contain the following:
  - The organizational chart should include all agency staff and volunteers by position.
  - List each member of the agency staff by name and position title.
  - Include volunteers on the organizational chart using tiers for volunteer positions (volunteers need not be listed individually).
  - Non-profit organizations should include the Board of Directors as a tier on the organizational chart, and must provide a list board officers and board members in a separate document, uploaded in the space provided. Please see the sample Board of Directors listing for a template.
  - In each position box, designate the percentage salary/wage derived from each funding source and whether the position is full time or part-time. All funding sources must be reflected on the organizational chart and hours must match what is reflected on the Personnel Budget Detail Worksheet.
  - If a new position is being proposed, or position is vacant, please identify as “new hire” or “vacant”.
  - When a staff person is hired, you have 30-days to notify the CVSC of the hire through email. Staff changes will also need to be documented in an amendment to the contract. Revised organizational charts must be uploaded with each project staffing change.
  - All of the agency’s agreement officials, including Authorizing Official, Civil Rights Contact Person, Project Director and Financial Officer must be on the organizational chart.
  - Please date the organizational chart.

### Fringe Benefits

- The system prepopulates the total salary from the Salary and Wages section into the fringe section as units. The units should be changed to the actual amount your agency will be using. Please indicate the amount of each fringe benefit that your agency intends to cover with federal funds in the Amount column and the amount your agency

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intends to cover with match funds in the Cash column. Benefit totals will calculate automatically.

- If the applicant uses a fringe benefits calculation rate, they must provide for this application, a detailed breakdown of the items included and the calculation rates for each item. If awarded, grantees are required to report actual fringe benefit expenditures.
- Fringe Benefits calculation rates are only allowed when:
  - The rate is applied consistently among all activities at agency
  - The rate is adjusted annually
  - The funded staff are eligible for benefits.
- Unemployment is only taken from the first \$9500 of each employee's salary unless your agency pays unemployment as a reimbursing employer.

## Volunteer

- Volunteer positions should each be listed separately.
- The rate of pay for volunteers cannot be more than the lowest paid VOCA funded employee.
- Please select the position title from the look up menu that best matches the position title at your agency. If your agency's position title is not an exact match for the title selected, please list your actual position title in the Notes area.
- Upload the Position Description for each position as indicated. The upload file should be in PDF format with a file name no longer than 13 characters including spaces, and should not include special characters such as \_%/@.
- The Volunteer Position Description must include:
  - The title of the position including the word Volunteer or Intern.
  - The duties and responsibilities of the position
  - The minimum qualifications.
  - The supervisory relationship including who supervises the position and if the position supervises others.
  - The skills and knowledge required for the position.
  - The personal qualities required for the position.
  - The amount of travel and or other special conditions or requirements.
  - The hours per day or week the employee will be expected to work.
- Volunteers should be listed in the In-Kind column.

## Volunteer Fringe Benefits

- FICA for the volunteer hours can be used as Match.
- Volunteer Fringe should be listed in the In-Kind column.

## Travel

- Describe the use of project funds for travel in the Narrative.
- For any and all individual line items in excess of \$500, please provide a brief description and justification for costs related to Travel in the Notes at the end of that line.
- On-site supporting documentation, such as a travel log, of travel expenses charged to this agreement must be maintained.

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- This budget category includes costs for mileage, meals, lodging, and registration fees for approved seminars or conferences and other travel costs incurred by employees for the conduct of the project. Travel costs must be for the purposes of providing direct services to victims, transporting victims, or staff development conferences for project personnel (VOCA funded or match only).
- Provide description of travel, number of miles, mileage rate per mile, daily per person lodging and meal costs and number of days obligated to the travel. The applicant should base travel items on rates set by applicant agency but may not exceed state rates. Effective state travel rates are available at [http://www.michigan.gov/dmb/0,1607,7-150-9141\\_13132---,00.html](http://www.michigan.gov/dmb/0,1607,7-150-9141_13132---,00.html) These include mileage rate; daily rates for lodging plus tax; and daily rates for meals: breakfast, lunch, and dinner.
- Travel costs associated with attendance at VOCA-sponsored trainings and meetings, including the VOCA Outcome Evaluation Training may be included in this category. Travel costs associated with attendance at in-state skills building training conferences offered by the Crime Victims Services Commission, Michigan Victim Assistance Academy, the Prosecuting Attorneys Association of Michigan and the Michigan Coalition Against Domestic and Sexual Violence are allowable skills development training opportunities. Travel costs for one VOCA funded full-time person per agency to attend the National Children's Advocacy Center National Symposium of Child Sexual Abuse may be included for accredited Child Advocacy Centers. Tribal programs may include travel costs for quarterly meetings of the Michigan Tribal Victim Assistance Committee.
- Funds may NOT be used to attend out-of-state trainings beyond those described here without pre-approval by the CVSC.

### Supplies and Materials


- Describe the use of project funds for supplies and materials in the Narrative.
- This budget category includes consumable and short-term items and equipment items. This includes: office supplies; printing and postage; equipment use fees (when supported by usage logs) for printing, photocopying, and postage; victim related books, workbooks, and resource materials; clothing made available in the emergency room to sexual assault victims; and printing brochures describing program services. Provide item explanation, quantity and unit price for each item. For things like consumables list each item in the notes for that line. Please be specific and do not use words like etc. and misc.
- Equipment could be included in either Supplies and Materials or Equipment depending on cost. Equipment items costing less than \$5,000 should be included in Supplies and Materials, and items costing more than \$5,000 should be included in Equipment.
- Examples of equipment items used in carrying out the objectives of the program include: TV; DVD player; digital camera, recording equipment and two-way mirrors for interviewing children; furniture for shelters; and equipment including desks, chairs and locking file cabinets for staff work spaces, furniture for victim waiting rooms, and children's play areas; computers, printers, scanners, paper shredders, and necessary software; and items necessary to make reasonable accommodations to victims and/or

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staff with disabilities. Also allowed are items to enhance services to handicapped victims, such as Braille resources or equipment or Telecommunications Devices for the Deaf (TTY/TTD).

- Leased equipment would go in the Other Expenses Category.

## Contractual

- Contractors that go in this section include affiliates, cooperating institutions or delegate contractors when compliance with federal grant requirements is delegated (passed through) to the sub recipient contractor.
- Examples: counselor, psychiatrist, lawyer providing emergency legal advocacy services  
Single audit contractors and interpreters would be listed in the Other Expenses category.
- Select service description from look up menu, quantity, rate, and unit of measure. The maximum rate for consultant/contractual services may not exceed Office of Justice Programs Financial Guide limits. An eight-hour day may include preparation and travel time in addition to the time required for actual performance. These limits are not discretionary. If awarded, a signed agreement for consultant/contractual services must be to the FSR in which the expenditure is reported.
- In the information box  enter the Contractor Company, the Service Provided, Salutation, First Name, Middle Initial, Last Name, Address, City, State and Zip Code for each Contractor assigned to this project.

## Equipment

- This budget category includes stationary and movable equipment valued at \$5,000 or more to be used in carrying out the objectives of the project. The cost of a single unit of equipment includes the necessary accessories and installation costs. Provide item, quantity, purchase price or monthly lease amount.
- VOCA funds may be used to purchase furniture and equipment that provides or enhances direct services to crime victims.
- Contractors are required to maintain property equipment records and annually report the following using agreement attachment B3: a description of the property and a serial number or other identifying number; identification of title holder; the acquisition date; the cost and the percentage of VOCA funds supporting the purchase; the location, use, and condition of the property; and any disposition data, including the date of disposal and sale price.

## Other Expenses

- This budget category includes other allowable costs incurred for the benefit of this program. The following are line item categories of expenses:
- Space Rental. This category includes the costs for rent of building space necessary for the operation of the program. Pro-rated costs of space rent (not occupancy charges) is limited to \$10 per square foot and a maximum of 15 square feet per funded full-time employee or the fair market value of comparable space in the same locality. Documentation for this charge must be maintained on-site and provided upon request to document current reported expenditures.

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- **Communication Costs.** This category includes the cost of telephone and data lines when related directly to the operation of the program. Items include beepers; beeper airtime; cell phones; cell phone provider fees; Internet service provider monthly fee; and telephone equipment, installation and monthly operating expenses.
- **Emergency Financial Assistance.** The emergency financial assistance category is limited to \$200 per victim/per Case. Written agency policy regarding distribution of emergency financial assistance funds is required. Emergency financial assistance is defined as emergency short-term child care or respite care for dependent adults, transportation, security measures (replacement of locks and repair of doors and windows to prevent immediate re-victimization), assistance in participating in criminal justice proceedings (i.e., transportation, childcare or respite care for dependent adults, and food).
- **Memberships.** This category includes the purchase of up to three organizational memberships in national or state criminal justice and victims' organizations. Individual memberships are not allowable.
- **Contractors.** Including professional fees and personnel hired on a private contracting basis related to the planning and operations of the program, or for some special aspect of the project. Travel and other costs of these consultants are to be included in this category.
  - Examples: single audit contractor, translator, or interpreter for hearing impaired.
  - The maximum rate for consultant/contractual services may not exceed Office of Justice Programs Financial Guide limits. An eight-hour day may include preparation and travel time in addition to the time required for actual performance. These limits are not discretionary. If awarded, a signed agreement for consultant/contractual services must be uploaded to the FSR in which the expenditure is reported.
  - In the notes enter the Contractor Company, the Service Provided, Salutation, First Name, Middle Initial, Last Name, Address, City, State and Zip Code for each Contractor assigned to this project.
  - For agencies including Single Audit expenses (either in Federal request or as Match): The agency must provide calculation method used to determine the pro-rated share of Single Audit expenses. Calculation should indicate total Federal grant amounts, total Single Audit costs, and prorated VOCA amount. Information must be provided in the notes for this line. Use this equation to find the amount that VOCA will pay for a single audit:

### Total Federal Amount including VOCA

- (VOCA Amount)

x(Total Single Audit Cost) = Amount VOCA will pay

#### Indirect Expenses

- Indirect costs are not allowed.

#### Budget Summary

- This page displays totals by budget category(ies) entered into the budget.

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## Source of Funds

- Source of Funds refers to the various funding sources that are used to support the program. Funds used to support the program should be recorded in this section according to the following categories:
  - Total Expenditures – The information is pre-populated from the Budget Summary of the total expenditures entered in the detail budget.
  - Fees and Collections – This is not allowed for the VOCA grant.
  - State Agreement – Enter the federal funding allocated for support of this VOCA project.
  - Local – Enter the amount of sub-grantee funds utilized for support of this VOCA project.
  - Federal – This section should not be used.
  - Foundation Grant- Cash Match.
  - United Way Grant- Cash Match.
  - Contributions- Cash Match.
  - Volunteer- In-kind match should only be included in this section.
  - Others- Cash Match.
  - Total Source of Funds – The system automatically calculates the total amount.

## Miscellaneous

- Local community support for this crime victim service project is required. Please upload 3 current Letters of Local Support. The upload file should be in PDF format with a file name no longer than 13 characters including spaces, and should not include special characters such as \_%/@.
  - Support letters should specifically reference the VOCA grant project, the crime victims' needs, and proposed solutions addressed in this proposal.
  - Letters should illustrate the unique relationship between your agency and your supporter.
  - Two of the three support letters must be from criminal justice officials (law enforcement, police, prosecutors or court officials), and one may be from another community service agency.
  - Tribal programs may include support letters from tribal, federal, state or local officials as appropriate.
  - Contact information for each application supporter authoring, must be included in the letter.
  - These letters should be on letterhead and include a signature.
- No other documents should be uploaded the Miscellaneous section unless otherwise instructed.

# EGrants VOCA Application Instructions

## Submitting the Application

Only the person listed as the Authorized Official can submit the application. If there has been a change in Authorized Official since the last application or amendment, we will need a signed delegation letter from either the last Authorized Official on record or the Board of Directors giving the new Authorized Official the authority to sign the contract.

To submit the application in Egrams, the Authorized Official will go to Grantee->Grant Application->Grant Application Preview. Once at the Grant Application Preview screen select a Grant program then click the 'Go' button. Select the program to be submitted and click the 'Submit' button. The system will ask for a confirmation before submitting.

## Required Documents

Please check every upload to make sure that it will open.

### Application

- Required documents listed below are to be uploaded to the VOCA Crime Victim Assistance Grant **application** URL: <http://egrams-mi.com/dch/>  
These documents should be uploaded on the screen requesting it in the application.
- **The upload file should be in PDF format with a file name no longer than 13 characters including spaces, and should not include special characters such as \_%/@. The maximum size of an upload may be up to 8MB.**
- **Facesheet Tab-**
  - Pg. 2 Organizational Detail-DOJ Financial Capacity Questionnaire
- **Budget Tab**
  - Salary and Wages
    - Organizational Chart – Combine with Board of Directors list to make 1 document as there is only 1 upload for these items.
    - Board of Directors (non-profit organizations) –Combine with Organizational Chart to make 1 document as there is only 1 upload for these items.
    - Position Description(s) and resume(s) for individuals included in the budget – These should be scanned in to make 1 document as there is only 1 upload per staff line.
  - Volunteer
    - Position Description(s) for volunteer position included in the budget
- **Miscellaneous Tab**
  - 3 Letters of Support

### Portal

- As part of the VOCA Crime Victim Assistance Grant application, the Applicant shall upload and submit required agency documents on their Agency Profile through MI EGrAMS agency portal at URL: <http://egrams-mi.com/portal/>.
- **The upload file should be in PDF format with a file name no longer than 13 characters including spaces, and should not include special characters such as \_%/@. The maximum size of an upload may be up to 8MB.**
- These documents should be updated by the applicant so that they are valid for the current fiscal year.
  - Fiscal Review Questionnaire.
  - 501 (c) 3 IRS documentation of non-profit status (non-profit applicant)



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- Articles of Incorporation and Amendments to the Articles of Incorporation (non-profit applicant)
- Michigan Solicitation License
- Certificate of Exemption for Hiring Practices on the Basis of Religion (religious organizations)
- Single Audit or Financial Statement Audit (most current)  
The required audit must be submitted to the Department within nine months of the end of the Grantee's fiscal year by e-mail to the Department at MDCH-AuditReports@michigan.gov.
- 990 (most current)
- Federal Civil Rights Compliance Checklist
- EEOP Plan (if required)
- EEOP Certification form upload (if required)
- Non Discrimination Notice - beneficiary
- Non Discrimination Notice - employee
- Non Discrimination Policies
- Grievance Procedures
- Title IX notice (if operate an education program or activity)
- Title IX grievance procedures (if operate an education program or activity)
- Discrimination Findings (if there are any)
- Limited English Self-Assessment Review
- Limited English Four Factor Analysis
- Limited English Policy/Plan

### **Saving a Microsoft Word document as a PDF document**

- Word 2010 - Open the word document that you would like to convert to PDF. Click the File tab, then Save As. In the "File Types" field, choose PDF or XPS Document. In the pop-up dialog box, enter a file name and location. Click Publish.
- Word 2010- Open the word document that you would like to convert to PDF Click the File tab, then Save As. In the File Name box, enter a name for the file, if you haven't already. In the Save as type list, click PDF (\*.pdf). Click Save.
- Word 2007- Open the word document that you would like to convert to PDF. Click the Microsoft Office Button, point to the arrow next to Save As, and then click PDF or XPS. In the File Name list, type or select a name for the document. In the Save as type list, click PDF. Click Publish. Don't have the PDF option? Download and install Acrobat from Adobe Systems.

# EGrants VOCA Application Instructions

## Uploading Documents to the Portal

After logging in go to Grantee->Agency->Grantee Agency. This should bring you to a screen with 4 tabs, you will be on the general information tab. Your agency Federal ID and Agency name should be listed, if not use the look up button to find your agency. If your information is listed click Change in the top left corner then click Find in the bottom right hand corner. You will be brought back to the General Information Tab. Go to the Attachment tab. You can upload your documents here.

To upload a document, use the lookup icon on the first empty line to select the type of document that you would like to upload. Click on the browse button at the end of the line, find your document, and click open. Click Ok in the bottom right hand corner to save the upload.

The screenshot shows the EGrAMS Application portal. At the top, there's a navigation bar with 'Grantee', 'Agency', and 'Grantee Agency' dropdowns. Below this, there are 'Change' and 'Review' buttons. The 'General Information' tab is active, showing fields for Federal ID, DUNS Number, Address Line 1, City, Website, Faith Based, Agency Type, Agency Name, Vendor Reference, Address Line 2, State, Zip, MI based business, and Agency Sub-Type. Below this is the 'Contact Information' section with fields for Contact Person, Phone, Ext, Email, and Fax. At the bottom, there's a table with columns 'Code', 'County', and 'Primary'. The 'Find' button is circled in red.

## Signing the Agreement

The application will have to be approved by multiple offices within the department before it can be signed. When it has been approved by the department an email will be sent to the Project Director to let your agency know that the contract is ready to be signed.

To sign the agreement the Authorized Official will go to Grantee->Project Director->Application Status. Once at the Application screen the Authorized Official will select a program and click the 'Find' button. The system will display the grant program status selected. Click the 'Sign Contract' button to accept and execute the agreement.